STATE OF SOUTH DAKOTA COMMON SENSE PARENTING ANNUAL REPORT

TELEPHONE:	EMAIL:
NAME OF "Common Sense Parenting Trainers:	
NAME OF "Responsive Parenting" Trainers:	
NAME OF "Distant Parenting" Trainers:	
NAME OF "Promoting School Success" Trainers:	
Court District(s) or Reservation classes held in:	
Class held in City?	
Advisory Board Member	
Peer Review held: Date:	Location:
Did you particpate in a Child Al What activities?	ouse Prevention Activity during the month of April?
Did you participate in a Fatherh What activities?	ood Activity during the year? Yes No
1. Number of classes held?	ctober 1, 2004, through September 30, 2005 Number of classes held for DSS social workers
2. Number of classes held for	communityNumber of classes held not paid thru contract
Signature	